

Name of Debtor (if individual, enter Last, First, Middle): <b>COHEN, MARCUS LEWIS</b>	Name of Joint Debtor (Last, First, Middle): <b>COHEN, NANCY EILEEN</b>
All Other Names Used by the Debtor in the last 6 years (include married, maiden, and trade names): MARK COHEN	All Other Names Used by the Joint Debtor in the last 6 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. No. / Complete EIN or Tax I.D. No. (if more than one, state all): 4046	Last four digits of Soc. Sec. No. / Complete EIN or Tax I.D. No. (if more than one, state all): 1004
Street Address of Debtor (including zip code): 1755 LAKE COOK ROAD #321 HIGHLAND PARK, IL 60035	Street Address of Joint Debtor (including zip code): 1755 LAKE COOK ROAD #321 HIGHLAND PARK, IL 60035
County of Residence or Principal Place of Business: LAKE	County of Residence or Principal Place of Business: LAKE
Mailing Address of Debtor (if different from street address):	Mailing Address of Debtor (if different from street address):

## INFORMATION REGARDING DEBTOR

**Venue** (Check any applicable box)

- ☒ Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

<p><b>Type of Debtor</b> (Check all boxes that apply)</p> <p><input checked="" type="checkbox"/> Individual(s) <input type="checkbox"/> Railroad</p> <p><input type="checkbox"/> Corporation <input type="checkbox"/> Stockbroker</p> <p><input type="checkbox"/> Partnership <input type="checkbox"/> Commodity Broker</p> <p><input type="checkbox"/> Other _____</p>	<p><b>Chapter or Section of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box)</p> <p><input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 13</p> <p><input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 12</p> <p><input type="checkbox"/> Sec. 304 - Case ancillary to foreign proceeding</p>
<p><b>Nature of Debts</b> (Check one box)</p> <p><input checked="" type="checkbox"/> Consumer/Non-Business <input type="checkbox"/> Business</p>	<p><b>Filing Fee</b> (Check one box)</p> <p><input checked="" type="checkbox"/> Full Filing Fee attached</p> <p><input type="checkbox"/> Filing Fee to be paid in installments (Applicable to individuals only).</p>
<p><b>Chapter 11 Small Business</b> (Check all boxes that apply)</p> <p><input type="checkbox"/> Debtor is a small business as defined in 11 U.S.C. § 101</p> <p><input type="checkbox"/> Debtor is and elects to be considered a small business under 11 U.S.C. § 1121(e) (Optional)</p>	<p>Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form.</p>

<b>Statistical/Administrative Information</b> (Estimates only)								THIS SPACE IS FOR COURT USE ONLY
<input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.								
Estimated Number of Creditors <input type="checkbox"/> 1-15 <input checked="" type="checkbox"/> 16-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1000-over								
Estimated Assets <div style="display: flex; justify-content: space-between;"> <span>\$0 to \$50,000</span> <span>\$50,001 to \$100,000</span> <span>\$100,001 to \$500,000</span> <span>\$500,001 to \$1 million</span> <span>\$1,000,001 to \$10 million</span> <span>\$10,000,001 to \$50 million</span> <span>\$50,000,001 to \$100 million</span> <span>More than \$100 million</span> </div> <div style="display: flex; justify-content: space-around;"> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div>								
Estimated Debts <div style="display: flex; justify-content: space-between;"> <span>\$0 to \$50,000</span> <span>\$50,001 to \$100,000</span> <span>\$100,001 to \$500,000</span> <span>\$500,001 to \$1 million</span> <span>\$1,000,001 to \$10 million</span> <span>\$10,000,001 to \$50 million</span> <span>\$50,000,001 to \$100 million</span> <span>More than \$100 million</span> </div> <div style="display: flex; justify-content: space-around;"> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> </div>								

**Prior Bankruptcy Case Filed Within Last 6 Years**

Location Where Filed:

Case Number:

Date Filed:

**Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor**

Name of Debtor:

Case Number:

Date Filed:

District:

Relationship:

Judge:

**SIGNATURES****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under Chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

/s/ Marcus Cohen 10- 9-2005

Signature of Debtor Date

/s/ Nancy Cohen 10- 9-2005

Signature of Co-Debtor Date

**Signature of Attorney**

/s/ Donald J. Cosley

Signature of Attorney

State Bar Member Number: 6224715

10- 9-2005

Date

Street Address:

1931 ROHLWING ROAD

SUITE #C

ROLLING MEADOWS, IL 60008

Telephone Number:

847-253-3100

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual Date

Printed Name of Authorized Individual

Title of Authorized Individual

**Exhibit A**

(To be completed if debtor is required to file periodic reports (e.g. forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11)

☐ Exhibit A is attached and made a part of this petition.

**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.

/s/ Donald J. Cosley 10- 9-2005

Signature of Attorney Date

**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

☐ Yes, and Exhibit C is attached and made a part of this petition.

☒ No

**Signature of Non-Attorney Petition Preparer**

I certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

Printed Name of Bankruptcy Petition Preparer

Social Security Number

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

Signature of Bankruptcy Petition Preparer Date

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. § 110; 18 U.S.C. § 156.

# UNITED STATES BANKRUPTCY COURT

## Northern District of Illinois, Eastern Division

### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts from Schedules D, E, and F to determine the total amount of the debtor's liabilities.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$0.00		
B - Personal Property	Yes	5	\$9700.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$10239.00	
E - Creditors Holding Unsecured Priority Claims	Yes	1		\$.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	11		\$177433.62	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	1			\$4,037.92
J - Current Expenditures of Individual Debtor(s)	Yes	1			\$3,836.00
Total Number of Sheets of ALL Schedules		24			
Total Assets			\$9,700.00		
Total Liabilities				\$187,672.62	

**Please Carefully and Accurately Complete the Following**

Do ASSETS require the immediate protection/attention of the trustee? ☐ Yes ☒ No

Has anyone received any compensation for services rendered in this case? ☒ Yes ☐ No

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HEARING SITE BEING REQUESTED:

CHAPTER: 7

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Is this a Pro Se Case? ☐ Yes ☒ No

Is this a Split Case? ☒ Yes ☐ No

County Code Number:

Debtors Name: MARCUS AND NANCY COHEN

Non-filing spouse's name:

Address: 1755 LAKE COOK ROAD  
#321  
HIGHLAND PARK, IL 60035

Non-filing spouse's social security number:

Primary attorney phone number: 847-253-3100

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## DEBTOR ACKNOWLEDGEMENT

THE UNDERSIGNED DEBTORS, being full advised, do hereby acknowledge as follows:

1. They have read their bankruptcy petition and schedules and exhibits and the same are true to the best of their knowledge and belief under penalties of perjury.
2. To the best of their knowledge, they have listed all their assets as shown on Schedules A and B and they have reviewed these schedules thoroughly.
3. They understand that in the event they become entitled to an inheritance or life insurance proceeds within 180 days after filing bankruptcy, that this would be an asset of the bankruptcy estate.
4. If the debtor is filing singularly but is married, in the event the debtor receives a marital property settlement within 180 days after filing bankruptcy, that this too is an asset of the bankruptcy estate.
5. Have either of the debtor transferred property over \$1,000 in value, at any one time, without adequate consideration, within 4 years prior to filing bankruptcy?

If yes, to whom, when, and what was the value of the property?

6. If you have a land contract for real estate or a Uniform Commercial Code UCC Financing Statement filed against you, please bring a copy of the recorded document to the 341 hearing.
7. If you own an automobile, mobile home or boat and the item is worth more than \$3,000, and if there is a lien on this item, please bring the title to the 341 meeting, or other evidence of lien perfection.
8. Do you have any claims pending or contemplated against anyone or any entity?

(Note if you fail to advise me of this, it is possible you will not be entitled to pursue any such claims!)

If yes, explain:

The Undersigned understand the above.

/s/ Marcus Cohen

10- 9-2005

Signature of Debtor

Date

/s/ Nancy Cohen

10- 9-2005

Signature of Co-Debtor

Date

DECLARATION CONCERNING DEBTOR(S) SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 25 sheets (total shown on summary page plus 1), and that they are true and correct to the best of my knowledge, information, and belief.

10- 9-2005	/s/ Marcus Cohen
Date	Signature of Debtor
10- 9-2005	/s/ Nancy Cohen
Date	Signature of Co-Debtor

\* \* \* \* \*

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, [the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership] of the [corporation or partnership] named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of [total shown on summary page plus 1] sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date	Signature of Debtor
Date	Signature of Joint Debtor (if any)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint or Community". If the debtor holds no interest in real property, write "None" under "Description and Location of Property".

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim".

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption	Amount of Secured Claim
NONE				
Total				

### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None". If additional space is needed in any category, attach a separate sheet properly identified with the same case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint or Community". If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

**Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.**

If the property is being held for the debtor by someone else, state the person's name and address under "Description and Location of Property".

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
1. Cash on hand.	<input checked="" type="checkbox"/>			
2. Checking, savings or other financial accounts, CD's, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses or cooperatives.	<input type="checkbox"/>	BANK OF AMERICA CLEARWATER, FL CHECKING ACCOUNT	W	\$1,000.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	<input checked="" type="checkbox"/>			
4. Household goods and furnishings, including audio, video, and computer equipment.	<input type="checkbox"/>	COUCH, TV, DRESSER, BEDROOM SET	J	\$500.00



Debtor		(if known)		
Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	<input checked="" type="checkbox"/>	NORMAL & ORDINARY	J	\$200.00
6. Wearing apparel.	<input type="checkbox"/>			
7. Furs and jewelry.	<input checked="" type="checkbox"/>			
8. Firearms and sports, photographic, and other hobby equipment.	<input checked="" type="checkbox"/>			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	<input checked="" type="checkbox"/>			
10. Annuities. Itemize and name each issuer.	<input checked="" type="checkbox"/>			
11. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Itemize.	<input checked="" type="checkbox"/>			
12. Stock and interests in incorporated and unincorporated businesses. Itemize.	<input checked="" type="checkbox"/>			

Debtor		(if known)		
Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
13. Interest in partnerships or joint ventures. Itemize.	<input checked="" type="checkbox"/>			
14. Government and corporate bonds and other negotiable and non-negotiable instruments.	<input checked="" type="checkbox"/>			
15. Accounts receivable.	<input checked="" type="checkbox"/>			
16. Alimony, maintenance, support and property settlements to which the debtor is or may be entitled. Give particulars.	<input checked="" type="checkbox"/>			
17. Other liquidated debts owing debtor including tax refunds. Give particulars.	<input checked="" type="checkbox"/>			
18. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule of Real Property.	<input checked="" type="checkbox"/>			
19. Contingent and noncontingent interests in estate of a decendant, death benefit plan, life insurance policy, or trust.	<input checked="" type="checkbox"/>			
20. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	<input checked="" type="checkbox"/>			

Debtor		(if known)		
Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
21. Patents, copyrights, and other intellectual property. Give particulars.	<input checked="" type="checkbox"/>			
22. Licenses, franchises, and other general intangibles. Give particulars.	<input checked="" type="checkbox"/>			
23. Automobiles, trucks, trailers, and other vehicles and accessories.	<input type="checkbox"/>	2002 MITSUBISHI LANCER	J	\$8,000.00
24. Boats, motors, and accessories.	<input checked="" type="checkbox"/>			
25. Aircraft and accessories.	<input checked="" type="checkbox"/>			
26. Office equipment, furnishings, and supplies.	<input checked="" type="checkbox"/>			
27. Machinery, fixtures, equipment, and supplies used in business.	<input checked="" type="checkbox"/>			
28. Inventory.	<input checked="" type="checkbox"/>			

Debtor		(if known)		
Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Market Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption
29. Animals.	<input checked="" type="checkbox"/>			
30. Crops - growing or harvested. Give particulars.	<input checked="" type="checkbox"/>			
31. Farming equipment and implements.	<input checked="" type="checkbox"/>			
32. Farm supplies, chemicals, and feed.	<input checked="" type="checkbox"/>			
33. Other personal property of any kind not already listed, such as season tickets. Itemize.	<input checked="" type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
	<input type="checkbox"/>			
Total				\$9,700.00

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor elects the exemptions to which debtor is entitled under: (check one box)

- ☐ 11 U.S.C. § 522(b)(1): Exemptions provided in 11 U.S.C. § 522(d). **Note: These exemptions are available only in certain states.**
- ☒ 11 U.S.C. § 522(b)(2): Exemptions available under applicable nonbankruptcy federal laws, state or local law where the debtor's domicile has been located for the 180 days immediately preceding the filing of the petition, or for a longer portion of the 180-day period than in any other place, and the debtor's interest as a tenant by the entirety or joint tenant to the extent the interest is exempt from process under applicable nonbankruptcy law.

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Market Value of Property Without Deducting Exemptions
BANK OF AMERICA CLEARWATER, FL CHECKING ACCOUNT	735-5/12-1001(b); In re Johnson, 57 B.R. 635 (N.D. Ill. 1986)	1000.00	\$1,000.00
COUCH, TV, DRESSER, BEDROOM SET	735-5/12-1001(b); In re Johnson, 57 B.R. 635 (N.D. Ill. 1986)	500.00	\$500.00
NORMAL & ORDINARY	735-5/12-1001(a)	200.00	\$200.00

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding claims secured by property of the debtor as of the date of filing of the petition. List creditors holding all types of secured interests such as judgement liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests. List creditors in alphabetical order to the extent practicable. If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Creditor's Name and Mailing Address Including Zip Code	Codebtor	Husband, Wife, Joint, or Community	Date Claim was Incurred, Nature of Lien, and Description and Market Value of Property Subject to Lien	Contingent	Unliquidated	Disputed	Amount of Claim Without Deducting Value of Collateral	Unsecured Portion, If Any
Account Number: 10005062423419001	<input type="checkbox"/>	J	2002 MITSUBISHI LANDER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$10,239.00	
MITSUBISHI CREDIT 10805 HOLDER STREET STE. 300 CYRPESS, CA 90630			VALUE \$8,000.00					
Account Number:	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
			VALUE \$					
Account Number:	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
			VALUE \$					
Account Number:	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
			VALUE \$					
Subtotal (Total of this page)							\$10,239.00	
Total (Use only on last page)							\$10,239.00	

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name and mailing address, including zip code, and account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled Codebtor, include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

☒ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

**TYPES OF PRIORITY CLAIMS** (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(2).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$4,300\* per person earned within 90 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(3).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4,300\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(5).

☐ **Deposits by individuals**

Claims of individuals up to \$1,950\* deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(6).

☐ **Alimony, Maintenance, or Support**

Claims of a spouse, former spouse, or child of the debtor for alimony, maintenance, or support, to the extent provided in 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTR, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

\* Amounts are subject to adjustment on April 1, 2004, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

\_\_\_\_ continuation sheets attached

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and account number, if any, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

Creditor's Name and Mailing Address Including Zip Code	Codebtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 5424-1802-0508-7148 NCO FINANCIAL SYSTEMS, INC. 507 PRUDENTIAL ROAD HORSHAM, PA 19044	<input type="checkbox"/>	COLLECTION FOR CITIBANK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$3,884.37
Account Number: 5003141421 NORTHSIDE HOSPITAL AND HEART INSTITUTE P.O. BOX 1021 LOUISVILLE, KY 40201	<input type="checkbox"/>	MEDICAL SERVICES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$353.22
Account Number: 5003141421 NORTHSIDE HOSPITAL P.O. BOX 9800 PALM HARBOR, FL 34682	<input type="checkbox"/>	MEDICAL SERVICES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$353.22
Account Number: 5839105482 BP AMOCO CITIBANK NA PROCESSING CENTER DES MOINES, IA 50360-6600	<input type="checkbox"/>	GASOLINE AND MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$834.04
Subtotal (Total of this page)						\$5,424.85
Total (Use only on last page)						



In re:

COHEN, MARCUS AND NANCY

Document

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Debtor

(if known)

Creditor's Name and Mailing Address Including Zip Code	Code Debtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 5839105482 PLAZA ASSOCIATES P.O. BOX 18008 NAUPPAUGE, NY 11788-8808	<input type="checkbox"/>	COLLECTION FOR BP AMOCO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$834.04
Account Number: 0469217832 NCC/COMMONWEALTH FIN. SYSTEMS 120 N. KEYSER AVENUE SCRANTON, PA 18504	<input type="checkbox"/>	COLLECTION FOR AMERICAN ELECTRIC POWER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$37.47
Account Number: 4436-0130-5083-8795 NATIONAL CITY BANK P.O. BOX 500 PORTAGE, MI 49081	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$14,254.72
Account Number: 4436-0130-5083-8795 FIRST AMERICAN INVESTMENT CO. GIOVE LAW OFFICE, PC P.O. BOX 992 BUFFALO, NY 14207	<input type="checkbox"/>	COLLECTION FOR NATIONAL CITY BANK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$14,254.72
Account Number: 51763574-11 MARK SHALE 95 P.O. BOX 820109 PHILADELPHIA, PA 19182-0109	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$318.39
Account Number: 51763574-11 RAI CREDIT CORP. MITCHELL N. KAY PC 7 PENN PLAZA NEW YORK, NY 10001-3995	<input type="checkbox"/>	COLLECTION FOR MARK SHALE 95	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$318.39
Account Number: 7272999283020319 VERIZON 1 VERIZON PLACE MC GA3B1 1HR ALPHARETTA, GA 30004-8510	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$85.74
Subtotal (Total of this page)						\$30,103.47
Total (Use only on last page)						

In re:

COHEN, MARCUS AND NANCY

Case No.

Debtor

(if known)

Creditor's Name and Mailing Address Including Zip Code	Code Debtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 7272999283020319 SOLOMON & SOLOMON COLUMBIA CIRCLE P.O. BOX 15019 ALBANY, NY 12212-5019	<input type="checkbox"/>	COLLECTION FOR VERIZON	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$85.74
Account Number: 41837 INTERCARE COMMUNITY HEALTH 50 INDUSTRIAL PARK DRIVE BANGOR, MI 49013-0130	<input type="checkbox"/>	MEDICAL SERVICES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$183.20
Account Number: 34530 INTERCARE COMMUNITY HEALTH 50 INDUSTRIAL PARK DRIVE BANGOR, MI 49013-0130	<input type="checkbox"/>	MEDICAL SERVICES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$253.00
Account Number: 6011-3006-4150-2263 DISCOVER FINANCIAL P.O. BOX 15316 WILMINGTON, DE 19850-5316	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$6,287.00
Account Number: 48725202-13 FIRST SELECT DISCOVER CREDIGY SERVICES CORP. MITCHELL N. KAY PC 7 PENN PLAZA NEW YORK, NY 10001-3995	<input type="checkbox"/>	COLLECTION FOR FIRST SELECT DISCOVER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$5,139.58
Account Number: 4366-1110-1129-1635 SHERMAN ACQUISITION, LLP FINANCIAL RECOVER SERVICES, INC. P.O. BOX 385908 MINNEAPOLIS, MN 55438-5908	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$6,223.46
Account Number: CG3C89474432096 MONOGRAM CREDIT CARD BANK FINANCIAL RECOVER SERVICES, INC. P.O. BOX 385908 MINNEAPOLIS, MN 55438-5908	<input type="checkbox"/>	COLLECTION AGENCY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$540.56
Subtotal (Total of this page)						\$18,712.54
Total (Use only on last page)						

In re:

COHEN, MARCUS AND NANCY

Case No.

Debtor

(if known)

Creditor's Name and Mailing Address Including Zip Code	Code Debtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 47343207 FDS BANK/RETAIL VAN RU CREDIT CORP. 10024 SKOKIE BLVD. SUITE 2 SKOKIE, IL 60077-1109	<input type="checkbox"/>	COLLECTION FOR FDS BANK/RETAIL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$714.66
Account Number: 4121-7415-2433-9624 CAPITAL ONE SERVICES 4851 COX ROAD #12038-0460 GLEN ALLEN, VA 23060	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$582.73
Account Number: 4121-7415-2433-9624 ARROW FINANCIAL SERVICES, LLC 5996 WEST TOUHY AVE. NILES, IL 60714-4610	<input type="checkbox"/>	COLLECTION FOR CAPITAL ONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$582.73
Account Number: 4678000649847 ASSET ACCEPTANCE LLC P.O. BOX 2036 WARREN, MI 48090-2036	<input type="checkbox"/>	COLLECTION FOR ASTA/FIRST CHICAGO	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$7,294.44
Account Number: 90080639287890 CHASE RECEIVABLES 1247 BROADWAY SONOMA, CA 95476	<input type="checkbox"/>	COLLECTION FOR RETAILER'S NAT'L TARGET STORE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$471.14
Account Number: 4388-6417-7813-2493 CAPITAL ONE BANK PROFESSIONAL CREDIT SERVICES P.O. BOX 13128 HAUPPAUGE, NY 11788-0563	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$2,176.71
Account Number: 5291-1521-2672-1691 CAPITAL ONE GOLD MASTERCARD P.O. BOX 85015 RICHMOND, VA 23285-5015	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$688.09
Subtotal (Total of this page)						\$12,510.50
Total (Use only on last page)						

In re:

COHEN, MARCUS AND NANCY

Case No.

Debtor

(if known)

Creditor's Name and Mailing Address Including Zip Code	Code Debtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 4121-7415-5243-39624 CAPITAL ONE P.O. BOX 85015 RICHMOND, VA 23285-5015	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$439.77
Account Number: _____ NCO FINANCIAL SYSTEMS P.O. BOX 2617, DEPT 64 GUASTI, CA 91743	<input type="checkbox"/>	COLLECTION FOR CAPITAL ONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$439.77
Account Number: 4366111011291635 SHERMAN ACQUISITIONS FINANCIAL RECOVERY SERVICES, INC. P.O. BOX 385908 MINNEAPOLIS, MN 55438-5908	<input type="checkbox"/>	COLLECTION FOR FIRST USA BANK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$6,223.46
Account Number: CG3C89474432096 GE CAPITAL CARD FINANCIAL RECOVERY SERVICES P.O. BOX 385908 MINNEAPOLIS, MN 55438-5908	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$540.56
Account Number: 30013921374510 RETAILERS NATIONAL BANK MARSHALL FIELDS 111 BOULDER INDUSTRIAL DRIVE BRIDGETON, MO 63044	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$4,335.24
Account Number: 10020328881610 RETAILERS NATIONAL BANK MARSHALL FIELDS 111 BOULDER INDUSTRIAL DRIVE BRIDGETON, MO 63044	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$7,195.51
Account Number: R0138211 RETAILERS NATIONAL BANK MARSHALL FIELDS 111 BOULDER INDUSTRIAL DRIVE BRIDGETON, MO 63044	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$888.00
Subtotal (Total of this page)						\$20,062.31
Total (Use only on last page)						

In re:

COHEN, MARCUS AND NANCY

Case No.

Debtor

(if known)

Creditor's Name and Mailing Address Including Zip Code	Code Debtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: _____ ARROW FINANCIAL SERVICES, LLC 21031 NETWORK PLACE CHICAGO, IL 60678-1031	<input type="checkbox"/>	COLLECTION FOR RETAILER'S NATIONAL BANK	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$12,418.75
Account Number: _____ LATHROP & GAGE LC 10851 MASTIN BLVD. SUITE 1000 OVERLAND PARK, KS 66210	<input type="checkbox"/>	COLLECTION FOR MAY COMPANY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$988.45
Account Number: 1953393452 ELDER BEERMAN STORES P.O. BOX 671 DAYTON, OH 45401-0671	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$1,440.89
Account Number: 1953393452 SANDFORD J. COHAN ATTORNEY AT LAW 2500 CORPORATE EXCHANGE DR. SUITE 151A COLUMBUS, OH 43231-7666	<input type="checkbox"/>	COLLECTION FOR ELDER BEERMAN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$1,440.89
Account Number: 7689201911 SAKS, INC. CARSON PIRIE SCOTT P.O. BOX 10327 JACKSON, MS 39289-0327	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$1,780.48
Account Number: 7689201911 CREDITORS DISCOUNT & AUDIT 331 FULTON STREET SUITE 535 PEORIA, IL 61602-1499	<input type="checkbox"/>	COLLECTION FOR SAKS, INC.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$1,780.48
Account Number: 0060000000021022470 REAIL RECOVER SERVICE OF NEW 190 MOORE STREET SUITE 300 HACKENSACK, NJ 07601	<input type="checkbox"/>	COLLECTION FOR SAKS FIFTH AVENUE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$969.28
Subtotal (Total of this page)						\$20,819.22
Total (Use only on last page)						

Debtor

(if known)

Creditor's Name and Mailing Address Including Zip Code	Codebtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 4734207 BLOOMINGDALE'S FDS BANK 9111 DUKE BLVD. MASON, OH 45040-8999	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$714.66
Account Number: 4734207 VAN RU CREDIT CORP. 10024 SKOKIE BLVD. SUITE 2 SKOKIE, IL 60077-1109	<input type="checkbox"/>	COLLECTION FOR FDS BANK/RETAIL	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$714.66
Account Number: 0170668023840 CAPITAL MANAGEMENT SERVICES 726 EXCHANGE STREET SUITE 700 BUFFALO, NY 14210	<input type="checkbox"/>	COLLECTION FOR SEARS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$777.89
Account Number: 775929 COH RADIOLOGY ASSOCIATES OF BERRIAN SUITE D208 777 RIVERVIEW DRIVE BENTON HARBOR, MI 49022	<input type="checkbox"/>	MEDICAL SERVICES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$96.00
Account Number: 110360 NCO FINANCIAL SYSTEMS P.O. BOX 41421 DEPT. 33 PHILADELPHIA, PA 19101	<input type="checkbox"/>	COLLECTION FOR GATEWAY RADIOLOGY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$60.00
Account Number: 4168-1000-1843-9156 FIRST SELECT P.O. BOX 660767 DALLAS, TX 75266-0767	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$3,220.00
Account Number: 6011-3006-4150-2263 DISCOVER PRIVATE ISSUE P.O. BOX 30397 SALT LAKE CITY, UT 84130-0397	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$6,871.00
Subtotal (Total of this page)						\$12,454.21
Total (Use only on last page)						

In re:

COHEN, MARCUS AND NANCY

Case No.

Debtor

(if known)

Creditor's Name and Mailing Address Including Zip Code	Code Debtor Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 172787 LAKELAND MEDICAL CENTER ST. JOSEPH, MI 49085	<input type="checkbox"/>	MEDICAL SERVICES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$52.25
Account Number: 372859478751000-D AMERICAN EXPRESS P.O. BOX 297812 FT. LAUDERDALE, FL 33329	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$966.87
Account Number: 372859478751000-D MITCHELL N. KAY PC 7 PENN PLAZA NEW YORK, NY 10001-3995	<input type="checkbox"/>	COLLECTION FOR AMERICAN EXPRESS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$996.87
Account Number: 1297809632 JCPENNEY P.O. BOX 981400 EL PASO, TX 79998-1206	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$618.00
Account Number: 6032-2032-9033-8986 WAL-MART P.O. BOX 981400 EL PASO, TX 79998-1206	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$959.00
Account Number: 134401469 WOLFF & ABRAHAMSON, LLP 702 KING FARM BLVD. ROCKVILLE, MD 20850	<input type="checkbox"/>	COLLECTION FOR BANK ONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$7,191.08
Account Number: 5856373000019443 WFNNB-ANN TAYLOR P.O. BOX 182273 COLUMBUS, OH 43218-2273	<input type="checkbox"/>	MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$651.00
Subtotal (Total of this page)						\$11,435.07
Total (Use only on last page)						

In re:

COHEN, MARCUS AND NANCY

Case No.

Debtor

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Creditor's Name and Mailing Address Including Zip Code	Code Debtor	Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 432682045165 FLEET BANK 301 ROCKERIMMON BLVD. COLORADO SPRINGS, CO 80919	<input type="checkbox"/>		MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$3,610.00
Account Number: 436611101303 CHASE BANK 800 BROOKSEGE BLDVD. WESTERVILLE, OH 43081	<input type="checkbox"/>		MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$9,632.00
Account Number: 549035524639 MBNA AMERICA P.O. BOX 17054 WILMINGTON, DE 19884	<input type="checkbox"/>		MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$646.00
Account Number: 426428020512 MBNA AMERICA P.O. BOX 17054 WILMINGTON, DE 19884	<input type="checkbox"/>		MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$1,217.00
Account Number: 8510000000027 MMCA/CI 6150 OMNI PARK DRIVE MOBILE, AL 36609	<input type="checkbox"/>		MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$8,376.00
Account Number: 214954802 LORD & TAYLOR P.O. BOX 94873 CLEVELAND, OH 44101-4873	<input type="checkbox"/>		MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$650.00
Account Number: 5230011010066940 PORTFOLIO RECOVERY P.O. BOX 12914 NORFOLK, VA 23541	<input type="checkbox"/>		COLLECTIONS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$7,094.60
Subtotal (Total of this page)							\$31,225.60
Total (Use only on last page)							



In re:

COHEN, MARCUS AND NANCY

Case No.

Debtor

(if known)

Creditor's Name and Mailing Address Including Zip Code	Code Debtor	Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: P17025542 ALLIED INTERSTATE 3000 CORPORATE EXHCHANGE DRIVE COLUMBUS, OH 43231	<input type="checkbox"/>		COLLECTION FOR CAPITAL ONE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$2,975.00
Account Number: 0024021898406400001 ALLIED INTERSTATE P.O. BOX 361316 COLUMBUS, OH 43236	<input type="checkbox"/>		COLLECTION FOR VERIZON	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$301.63
Account Number: 6164283487917 TRUE LOGIC FIN. 7100 E. BELLEVIEW AVE STE. 308 INGLEWOOD, CO 80111-1634	<input type="checkbox"/>		COLLECTION FOR AMERITECH	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$237.02
Account Number: 4862-3624-9894-6683 CAPITAL ONE P.O. BOX 790216 ST. LOUIS, MO 63179-0216	<input type="checkbox"/>		MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$203.59
Account Number: 4388-6425-5758-3500 CAPITAL ONE P.O. BOX 790216 ST. LOUIS, MO 63179-0216	<input type="checkbox"/>		MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$441.12
Account Number: 0118585601 CARSON PIRIE SCOTT P.O. BOX 10327 JACKSON, MS 39289-0327	<input type="checkbox"/>		MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$500.00
Account Number: 5797451121 BURDINE'S CINCINNATI, OH 45201	<input type="checkbox"/>		MISCELLANEOUS PURCHASES	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$500.00
Subtotal (Total of this page)							\$5,158.36
Total (Use only on last page)							

Debtor		(if known)					
Creditor's Name and Mailing Address Including Zip Code	Codebtor	Husband, Wife, Joint, or Community	Date Claim was Incurred and Consideration for Claim. If Claim is Subject to Setoff, so State.	Contingent	Unliquidated	Disputed	Amount of Claim
Account Number: 4436013050838795 NEW CENTURY FIN. SVC. 2 RIDGEDALE AVENUE STE. 104 CEDAR KNOLLS, NJ 07927	<input type="checkbox"/>		COLLECTION FOR NATIONAL CITY	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$9,527.49
Account Number: _____	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Account Number: _____	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Account Number: _____	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Account Number: _____	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Account Number: _____	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Account Number: _____	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Subtotal (Total of this page)							\$9,527.49
Total (Use only on last page)							\$177,433.62

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests.

State nature of debtor's interest in contract, i.e. "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease.

Provide the names and complete mailing addresses of all other parties to each lease or contract described.

NOTE: A party listed on this schedule will not receive notice of the filing of this case unless the party is also scheduled in the appropriate schedule of creditors.

☒ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State Whether Lease is for Nonresidential Real Property. State Contract Number of Any Government Contract

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. In community property states, a married debtor not filing a joint case should report the name and address of the nondebtor spouse on this schedule. Include all names used by the nondebtor spouse during the six years immediately preceding the commencement of this case.

☒ Check this box if debtor has no codebtors.

Name and Mailing Address of Codebtor	Name and Mailing Address of Creditor

## SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Debtor's Marital Status: MARRIED	DEPENDENTS OF DEBTOR AND SPOUSE	
	NAMES	AGE RELATIONSHIP
Employment:	DEBTOR	SPOUSE
Occupation	PROJECT MANAGER	CLIENT SERVICES
Name of Employer	APEX FINANCIAL	HILCO RECEIVABLES, LLC
How Long Employed	5 MONTHS	15 MONTHS
Address of Employer	1120 LAKE COOK ROAD BUFFALO GROVE, IL 60089	1120 LAKE COOK ROAD BUFFALO GROVE, IL 60089

**Income:** (Estimate of average monthly income)

Current monthly gross wages, salary, and commissions

(pro rate if not paid monthly.) \$ 2,660.22 \$ 2,143.44

Estimated monthly overtime \$ \$

**SUBTOTAL** \$ 2,660.22 \$ 2,143.44

**LESS PAYROLL DEDUCTIONS**

a. Payroll taxes and social security \$ 252.84 \$ 169.72  
b. Insurance \$ 43.24 \$ 14.50  
c. Union dues \$ \$  
d. Other (Specify: OASDI) \$ 152.54 \$ 132.90  
e. Other (Specify: ) \$ \$

**SUBTOTAL OF PAYROLL DEDUCTIONS** \$ 448.62 \$ 317.12

**TOTAL NET MONTHLY TAKE HOME PAY** \$ 2,211.60 \$ 1,826.32

Regular income from operation of business or profession or farm \$ \$  
(attach detailed statement)

Income from real property \$ \$

Interest and dividends \$ \$

Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above \$ \$

Social security or other government assistance (Specify: ) \$ \$

Pension or retirement income \$ \$

Other monthly income \$ \$

**TOTAL MONTHLY INCOME** \$ 2,211.60 \$ 1,826.32

**TOTAL COMBINED MONTHLY INCOME** \$ 4,037.92

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document:

### SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse".

Rent or home mortgage payment (include lot rented for mobile home)	\$	1,719.00
Are real estate taxes included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Is property insurance included? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Utilities: Electric and heating fuel	\$	150.00
Cable	\$	30.00
Water and sewer	\$	
Telephone	\$	70.00
Other:	\$	
Home maintenance (repairs and upkeep)	\$	
Food	\$	500.00
Tobacco and Alcohol	\$	
Health and Beauty Products	\$	
Clothing	\$	200.00
Laundry and dry cleaning	\$	100.00
Medical and dental expenses	\$	300.00
Transportation (not including car payments)	\$	150.00
Recreation, clubs and extertainment, newspapers, magazines	\$	25.00
Charitable contributions	\$	
Automobile Repairs	\$	
School Tuition	\$	
School Related Expenses	\$	
Insurance (not deducted from wages or included in home mortgage payments)		
Homeowner's or renters	\$	100.00
Life	\$	60.00
Health	\$	
Auto	\$	62.00
Other:	\$	
Taxes (not deducted from wages or included in home mortgage payments)	\$	
Installment payments: (In chapter 12 or 13 cases, do not list payments to be included in the plan)		
Auto	\$	370.00
Other:	\$	
Other:	\$	
Alimony, maintenance, and support paid to others	\$	
Payments for support of additional dependents not living at your home	\$	
Day Care	\$	
Pet Care	\$	
Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	
Other:	\$	
TOTAL MONTHLY EXPENSES	\$	3,836.00

**FORM 7. STATEMENT OF FINANCIAL AFFAIRS**

**UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois, Eastern Division**

In Re: COHEN, MARCUS AND NANCY  
**Debtor**

Case No. \_\_\_\_\_  
 (if known)

**STATEMENT OF FINANCIAL AFFAIRS**

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs.

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to any question is "None", mark the box labeled "None". If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

**DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the two years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

**1. Income from employment or operation of business**

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Amount	Source (if more than one)
2005 - \$ 32,735.00 YTD	WAGES
2004 - \$20,000.00	WAGES
2003 - \$20,000.00	WAGES

None ☒

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Amount

Source (if more than one)

**3. Payments to creditors**None ☒

a. List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, made within 90 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor

Dates of Payments

Amount Paid

Amount Still Owing

None ☒

b. List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor  
and Relationship to Debtor

Dates of Payment

Amount Paid

Amount Still Owing

**4. Suits and administrative proceedings, executions, garnishments and attachments**None ☒

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Caption of Suit and Case Number

Nature of Proceeding

Court or Agency  
and Location

Status or Disposition



None ☒ Case 05-52802 Doc 1 Filed 10/13/05 Entered 10/13/05 16:47:17 Desc Main Document Page 33 of 46  
 List all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Person for Whose  
Benefit Property was Seized

Date of Seizure

Description and Value of Property

### 5. Repossessions, foreclosures and returns

None ☒ List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Date of Repossession,  
Foreclosure Sale,  
Transfer or Return

Name and Address of Creditor or Seller

Description and Value of Property

### 6. Assignments and receiverships

None ☒ a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Assignee

Date of Assignment

Terms of Assignment or Settlement

None ☒ b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Custodian

Name and Location of Court  
Case Title and Number

Date of Order

Description and  
Value of Property

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None ☒ List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Person or Organization	Relationship to Debtor, if any	Date of Gift	Description and Value of Gift
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### 8. Losses

None ☒ List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Description and Value of Property	Description of circumstances and, if loss was covered in whole or in part by insurance, give particulars	Date of Loss
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### 9. Payments related to debt counseling or bankruptcy

None ☐ List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

Name and Address of Payee	Date of Payment, Name of Payor if other than Debtor	Amount of Money or Description and Value of Property
JAMES POPE 17W 220 22ND STREET SUITE 200 OAKBROOK TERRACE, IL 60181	OCTOBER 2005	\$500.00
DONALD J. COSLEY 1931 ROHLWING ROAD SUITE C ROLLING MEADOWS, IL 60008	OCTOBER 2005	\$500.00

None ☒ List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Transferee, Relationship to Debtor	Date	Describe Property Transferred and Value Received
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#### 11. Closed financial accounts

None ☒ List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Institution	Type and Number of Account and Amount of Final Balance	Amount and Date of Sale or Closing
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#### 12. Safe deposit boxes

None ☒ List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Bank or Other Depository	Names and Addresses of those with Access to Box or Depository	Description of Contents	Date of Transfer or Surrender, if any
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None ☒ List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor	Date of Setoff	Amount of Setoff
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#### 14. Property held for another person

None ☒ List all property owned by another person that the debtor holds or controls.

Name and Address of Owner	Description and Value of Property	Location of Property
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#### 15. Prior address of debtor

None ☐ If the debtor has moved within the two years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

Address	Name Used	Dates of Occupancy
1158 HOHLFELDER GLENCO, IL 60022	MARCUS COHEN AND NANCY COHEN	03/04 - 10/05
13795 FEATHER SOUND CIRCLE CLEARWATER, FL	MARCUS COHEN AND NANCY COHEN	3/02 - 3/04
STRATFORD ST. JOSEPH, MI	MARCUS COHEN AND NANCY COHEN	99 - 02

None ☒

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the six-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

Name

**17. Environmental information**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None ☒

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

Site Name and Address	Name and Address of Governmental Unit	Date of Notice	Environmental Law
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None ☒

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

Site Name and Address	Name and Address of Governmental Unit	Date of Notice	Environmental Law
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None ☒ Case 05-52802 Doc 1 Filed 10/13/05 Entered 10/13/05 16:47:17 Desc Main Document Page 38 of 46

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

Name and Address of  
Governmental Unit

Docket Number

Status or Disposition

### 18. Nature, location and name of business

None ☒ a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partnership, sole proprietorship, or was a self-employed professional within the six-years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

Name, Taxpayer I.D. Number, Address

Nature of Business

Beginning and Ending Dates

None ☒ b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

Name

Address

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within the six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or otherwise self-employed.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

- None ☒ a. List all bookkeepers and accountants who within the six years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

Name and Address

Dates Services Rendered

- None ☒ b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of this debtor.

Name and Address

Dates Services Rendered

- None ☒ c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

Name

Address

- None ☒ d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued within the two years immediately preceding the commencement of this case by the debtor.

Name and Address

Date Issued

- None ☒ a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

Date of Inventory	Inventory Supervisor	Amount of Inventory (Specify cost, market or other basis)
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- None ☒ b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

Date of Inventory	Name and Address of Custodian of Inventory Records
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## 21. Current Partners, Officers, Directors and Shareholders

- None ☒ a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

Name and Address	Nature of Interest	Percentage of Interest
------------------	--------------------	------------------------

- None ☒ b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting securities of the corporation.

Name and Address	Title	Nature and Percentage of Stock Ownership
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None ☒ a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

Name and Address

Date of Withdrawal

None ☒ b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

Name and Address

Title

Date of Termination

### 23. Withdrawals from a partnership or distributions by a corporation

None ☒ If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

Name and Address of Recipient,

Amount of Money

### 24. Tax consolidation group

None ☒ If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within the six-year period immediately preceding the commencement of this case.

Name of Parent Corporation

Taxpayer Identification Number

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None ☒ If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within the six-year period immediately preceding the commencement of this case.

Name of Pension Fund

Taxpayer Identification Number

[If completed by an individual or individual and spouse.]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

10- 9-2005

Date

/s/ **Marcus Cohen**

**Signature of Debtor**

10- 9-2005

Date

/s/ **Nancy Cohen**

**Signature of Co-Debtor**

\* \* \* \* \*

[If completed on behalf of a partnership or corporation]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief.

Date

**Signature**

Print Name and Title

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Debtor

(if known)

**UNITED STATES BANKRUPTCY COURT**  
**Northern District of Illinois, Eastern Division**

**STATEMENT**  
**Pursuant to Rule 2016(b)**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that the compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with this bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	1,200.00
Prior to the filing of this statement I have received	\$	300.00
Amount of filing fee in this case paid	\$	209.00
Balance Due	\$	300.00

2. The source of the compensation paid to me was:

☒ Debtor(s) ☐ Other (Specify: )

3. The source of the compensation to be paid to me is:

☒ Debtor(s) ☐ Other (Specify: )

4. ☐ I have not agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm.

☒ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- ☒ Analysis of the debtor(s) financial situation, and rendering advice to the debtor(s) in determining whether to file a petition in bankruptcy under title 11 of the United States Code.
- ☒ Preparation and filing of any petition, schedules, statements, and plan which may be required.
- ☒ Representation of the debtor(s) at the meeting of creditors.
- ☒ Negotiation of reaffirmation or surrender of secured collateral.
- ☐
- ☐

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

10- 9-2005

Date

/s/ Donald J. Cosley

Signature of Attorney

UNITED STATES BANKRUPTCY COURT  
Northern District of Illinois, Eastern Division

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

1. I, the debtor, have filed a schedule of assets and liabilities which includes consumer debts secured by property of the estate.
2. My intention with respect to the property of the estate which secures those consumer debts are as follows:
- A. Property To Be Surrendered

Description of Property	Creditor's Name
-------------------------	-----------------

B. Property To Be Retained

Description of Property	Creditor's Name	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
2002 MITSUBISHI	MITSUBISHI CREDIT	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

3. I understand that § 521(2)(B) of the Bankruptcy Code requires that I perform the above stated intention within 45 days of the filing of this statement with the court, or within such additional time as the court, for cause, within such 45-day period fixes.

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of intentions and my attachments thereto and that they are true and correct.

10- 9-2005	/s/ Marcus Cohen
Date	Signature of Debtor
10- 9-2005	/s/ Nancy Cohen
Date	Signature of Co-Debtor

**UNITED STATES BANKRUPTCY COURT**  
**Northern District of Illinois, Eastern Division**

In Re: COHEN, MARCUS AND NANCY  
**Debtor**

Case No. \_\_\_\_\_  
(if known)

**VERIFICATION OF MAILING LIST**

The Debtor(s) certifies that the attached mailing list (only one option may be selected per form):

- ☒ is the first mail matrix in this case.  
☐ adds entities not listed on previously filed mailing list(s).  
☐ changes or corrects name(s) and address(es) on previously filed mailing list(s).  
☐ deletes name(s) and address(es) on previously filed mailing list(s).

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct.

10- 9-2005  
Date

/s/ Donald J. Cosley  
Signature of Attorney

/s/ Marcus Cohen  
Signature of Debtor

/s/ Nancy Cohen  
Signature of Co-Debtor